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## THE MILLHORN LAW FIRM

### Attorneys at Law

Michael D. Millhorn, P.A. Kevin A. Sentner, P.A. \* Eric C. Millhorn, P.A.

\*A subsidiary of The Millhorn Law Firm

Reply to: Lady Lake Office

#### Offices:

Lady Lake:
The Pines Professional Center 13710 U.S. 441
Suite 100
Lady Lake, Florida 32159
Telephone: (352) 753-9333
Facsimile: (352) 753-7447

#### Ocala:

416 S. E. Fort King Street Ocala, Florida 34471 Telephone: (352) 307-2221

E-Mail: eric@millhorn.com

October 25, 2005

Secretary of State Registration Section Division of Corporations P. O. Box 6327 Tallahassee, Florida 32314

## RE: AMENDMENT TO THE ARTICLES OF OR ORGANIZATION FOR GARVINO'S, LLC.

Dear Division of Corporations:

Enclosed is the executed original and one copy of the Amendment to the Articles of Organization for Garvino's, LLC. I have also enclosed my check made payable to the Secretary of State in the amount of \$100.00 to cover the costs of the following:

Amending the Articles of Organization for Garvino's, LLC:

Amendment or Correct to Articles: \$ 35.00

Change of Registered Agent: \$35.00

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TOTAL AMOUNT:

Please return the certified copy to my office. Thank you in advance for y facilitating this request.

Sincerely, THE MILLHORN LAW FIRM

Certified Copy:

Eric C. Millhorn

Enclosures

## STATEMENT OF CHANGE OF REGISTERED AGENT FOR LIMITED LIABILITY COMPANY

1. The name of the Limited Liability Company is: (before amended)

Garvinos LLC

2. The mailing address of the Limited Liability Company is:

1081 CANAL STREET THE VILLAGES, FLORIDA 32162

3. Date of filing/registration in Florida:

JUNE 22, 2005

4. Document number:

L05000062219

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State.

RICHARD J. BONNIE 1889 HARTFORD PATH THE VILLAGES, FLORIDA 32159

6. The name and address of the new registered agent:

GARY A. BONNIE 1081 CANAL STREET THE VILLAGES, FLORIDA 32162

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR GARVINO'S, LLC, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT AS PROVIDED FOR IN CHAPTER 608 OF THE FLORIDA STATUTES.

SECREILARY OF STATE TALLAHASSEE, FLORIDA

Registered Agent